



2013 Application for Admission

YOUTH PROGRAM (Age: 13-17)

Vancouver, Toronto, Montréal, San Francisco

STUDENT INFORMATION

Family Name(s): _____ First Name: _____ Full Middle Name(s): _____
(as shown on passport) (as shown on passport) (as shown on passport)

Gender: ☐ Male ☐ Female Birthday (mm/dd/yy): ____/____/____ Country of Birth: _____

Nationality: _____ First Language: _____ Passport Number: _____

Family name of parent/guardian: _____ First Name(s): _____

Address in Home Country: _____

Tel: _____ Cell: _____ Email: _____

Mailing Address (if different from Address in Home Country): _____

Emergency Contact Name: _____ Emergency Tel (24hrs): _____

STUDY INFORMATION

☐ VANCOUVER WINTER YOUTH PROGRAM

Location: ☐ Vancouver

Study Length	Start Dates 2013
<input type="checkbox"/> 2 weeks	<input type="checkbox"/> Jan 6 <input type="checkbox"/> Jan 13
<input type="checkbox"/> 3 weeks	<input type="checkbox"/> Jan 6

Study Length	Start Dates 2014
<input type="checkbox"/> 2 week	<input type="checkbox"/> Jan 5 <input type="checkbox"/> Jan 12 <input type="checkbox"/> Jan 19
<input type="checkbox"/> 3 weeks	<input type="checkbox"/> Jan 5 <input type="checkbox"/> Jan 12
<input type="checkbox"/> 4 weeks	<input type="checkbox"/> Jan 5

☐ NORTH AMERICAN SUMMER YOUTH PROGRAM

Location: ☐ Vancouver ☐ Toronto ☐ Montréal ☐ San Francisco*

Study Length	Start Dates 2013
<input type="checkbox"/> 1 week	<input type="checkbox"/> Jun 23 <input type="checkbox"/> Jun 30 <input type="checkbox"/> Jul 7 <input type="checkbox"/> Jul 14 <input type="checkbox"/> Jul 21 <input type="checkbox"/> Jul 28 <input type="checkbox"/> Aug 4
<input type="checkbox"/> 2 weeks	<input type="checkbox"/> Jun 23 <input type="checkbox"/> Jun 30 <input type="checkbox"/> Jul 7 <input type="checkbox"/> Jul 14 <input type="checkbox"/> Jul 21 <input type="checkbox"/> Jul 28
<input type="checkbox"/> 3 weeks	<input type="checkbox"/> Jun 23 <input type="checkbox"/> Jun 30 <input type="checkbox"/> Jul 7 <input type="checkbox"/> Jul 14 <input type="checkbox"/> Jul 21
<input type="checkbox"/> 4 weeks	<input type="checkbox"/> Jun 23 <input type="checkbox"/> Jun 30 <input type="checkbox"/> Jul 7 <input type="checkbox"/> Jul 14
<input type="checkbox"/> 5 weeks	<input type="checkbox"/> Jun 23 <input type="checkbox"/> Jun 30 <input type="checkbox"/> Jul 7
<input type="checkbox"/> 6 weeks	<input type="checkbox"/> Jun 23 <input type="checkbox"/> Jun 30
<input type="checkbox"/> 7 weeks	<input type="checkbox"/> Jun 23

* San Francisco offers a summer Counselor In Training (CIT) program for Youth aged 18-21 - See the general San Francisco application form to register.

☐ SAN FRANCISCO WINTER YOUTH PROGRAM

Study Length	Start Date 2012
<input type="checkbox"/> 1 week	<input type="checkbox"/> Dec 9 <input type="checkbox"/> Dec 16
<input type="checkbox"/> 2 weeks	<input type="checkbox"/> Dec 9

Study Length	Start Date 2013
<input type="checkbox"/> 1 week	<input type="checkbox"/> Jan 6 <input type="checkbox"/> Jan 13 <input type="checkbox"/> Jan 20
<input type="checkbox"/> 2 weeks	<input type="checkbox"/> Jan 6 <input type="checkbox"/> Jan 13
<input type="checkbox"/> 3 weeks	<input type="checkbox"/> Jan 6

Study Length	Start Date 2013
<input type="checkbox"/> 1 week	<input type="checkbox"/> Dec 8 <input type="checkbox"/> Dec 15
<input type="checkbox"/> 2 weeks	<input type="checkbox"/> Dec 8

Study Length	Start Date 2014
<input type="checkbox"/> 1 week	<input type="checkbox"/> Jan 5 <input type="checkbox"/> Jan 12 <input type="checkbox"/> Jan 19
<input type="checkbox"/> 2 weeks	<input type="checkbox"/> Jan 5 <input type="checkbox"/> Jan 12
<input type="checkbox"/> 3 weeks	<input type="checkbox"/> Jan 5

Study Language (Montréal only): ☐ English ☐ French

Status in Canada / USA: ☐ Student ☐ Visitor ☐ Other

I first found ILSC through: ☐ Friend/Family ☐ ILSC Website ☐ Other Website ☐ Search Engine ☐ Facebook ☐ Agency (Agency Name / Fax) _____

ACCOMMODATION / TRAVEL INFORMATION (Program starts on Sundays, and ends on Saturdays)

Arrival	Date (mm/dd):	Flight Number:
	Time (24 hr clock):	Arriving Airport:
Departure	Date (mm/dd):	Flight Number:
	Time (24 hr clock):	Arriving Airport:

Do you have any medical condition(s) we should be aware of ?

☐ No ☐ Yes _____

Do you take any daily medication?

☐ No ☐ Yes _____

Do you have any allergies?

☐ No ☐ Yes _____

Do you require a specific diet (e.g. vegetarian)?

☐ No ☐ Yes _____

Have you had any medical/physiological or social problems which may affect your ability to complete the program?

☐ No ☐ Yes _____

Are you comfortable with pets? ☐ Yes ☐ No

If no, please specify pets dislike: _____

Interest or comments: _____

ILSC Montréal students only:

Do you want your homestay family's spoken language to be ☐ English ☐ French

MEDICAL INSURANCE

Company name: _____

Insurance policy number: _____

Upon arrival, all ILSC students must show proof of valid medical insurance for their entire term at ILSC.

STUDENT CONTRACT (Student Agreement and Health Declaration)

I declare that the information I have given on this enrollment form is correct and accurate. I declare that I am in possession of sufficient funds to finance my full term of study at ILSC. I have read and understood all of ILSC's policies including the Cancellation and Refund policies (see page 3) and agree to abide by any decisions of the School's management regarding the enforcement thereof. I acknowledge and accept that during the course of my study at ILSC or during activity programs, I may be photographed, video taped or audio taped and I hereby grant ILSC unrestricted and non-expiring permission and all rights to use or license such media for any advertising or promotional purposes that ILSC may deem appropriate, without any compensation whatsoever.

I declare that I will disclose to ILSC any contagious medical condition that I might contract prior to or during my stay at ILSC and I agree to disclose any pre-existing medical or health condition that may require ongoing or intermittent medical attention or that may affect my ability to fully participate in either classroom or activity programs. I hereby authorize any doctor, EHS or medical facility to provide treatment to me if I am injured or ill whether or not I am able to provide consent. I agree and acknowledge that ILSC may collect personal information including medical information as a result of this application and/or my time at ILSC and acknowledge that this information will only be used in the course of the provision of educational, ancillary and medical services either directly or indirectly and for no other purposes.

I agree that ILSC may provide my educational records or information to my parents (if a minor) sponsoring. Agency or any other Educational Institution to which I apply. I agree to save and hold harmless, ILSC its agents, employees, homestay families and assigns for any loss, damage or injury which may occur to me or my property and hereby permanently waive all claims for loss, damage or injury resulting or arising from my term of attendance at ILSC. I agree as well that the violation of any of the above conditions or if any of the information provided in this application is discovered to be false or misleading, I may be dismissed from ILSC without notice or recourse.

I have read and understood the above and agree to be fully bound by this contract and declare that I have received a signed copy of this contract.

Student Signature: _____ **Date: (mm/dd/yy)** _____

Signature of parent/guardian: _____ **Date: (mm/dd/yy)** _____

ILSC Authorized signature: _____ **Date: (mm/dd/yy)** _____

CREDIT CARD PAYMENT

☐ MasterCard ☐ Visa Name of cardholder: _____ Cardholder signature: _____

Credit card number: _____ Security Code: _____ Expiry date: _____ Total payment ☐ USD ☐ CAD: \$ _____

2013 ILSC Youth Program Fees

Summer Youth Program (Vancouver / Toronto / Montréal)	CAD	Winter Youth Program (Vancouver)	CAD	Summer/Winter Youth Program (San Francisco)	USD
1 week	\$1,235	1 week	N/A	1 week	\$1,495
2 weeks	\$1,940	2 weeks	\$1,890	2 weeks	\$2,425
3 weeks	\$2,770	3 weeks	\$2,655	3 weeks	\$3,445
4 weeks	\$3,510			4 weeks	\$4,335
5 weeks	\$4,250			5 weeks	\$5,265
6 weeks	\$4,990			6 weeks	\$6,195
7 weeks	\$5,730			7 weeks	\$7,125

Prices are in CAD, USD as shown on the table above. Above fees include the \$350 (CAD) non-refundable Registration Fee for Canadian Youth Programs, or \$250 (US) non-refundable Registration Fee for San Francisco Youth Programs. **Non-refundable deposit of \$350 for Canada Youth Program, and \$250 for US Youth Program must be made at time of registration.** Prices effective from January 30, 2013 to January 30, 2014 (Based on the registration date). Availability of the program is subject to enrolment.

SUMMER & WINTER PROGRAM PACKAGE INCLUDES: (EXCEPT VANCOUVER WINTER)

- Morning classes
 - Canada: 17 lessons/week
 - San Francisco: 20 lessons/week
- Accommodation
 - Full-board Homestay
 - Single Room (includes 3 meals and snacks)
 - Airport pick-up and drop-off
- Five after school activities and Saturday excursion per week
- Registration, Material and Homestay Placement Fees
- ILSC Certificate of Completion

VANCOUVER WINTER PROGRAM PACKAGE INCLUDES:

- Morning classes (17 lessons/week)
 - Accommodation
 - Full-board Homestay
 - Single Room (includes 3 meals and snacks)
 - Airport pick-up and drop-off
 - Two after school activities & one ski trip per week*
 - Registration, Material and Homestay Placement Fees
 - ILSC Certificate of Completion
- *Optional: Additional trips/activities are available with extra cost.

PACKAGE PRICE DOES NOT INCLUDE:

- Medical Insurance from home country
- International flight ticket to Canada or USA, airport and airline taxes.
- Public transportation between the school, activities and homestay
- Custodial letter fee, if applicable
- Personal shopping and expenses

PAYMENT OF FEES

Non-refundable deposit of \$350 (CAD) for Canadian Youth Programs, or \$250 (US) for San Francisco Youth Programs to cover the Registration Fee must be made at time of registration. The balance of the fee must be paid a minimum of 2 weeks prior to your first day at ILSC.

VISA

It is the parent/guardian's responsibility to contact their local embassy/consulate office in order to obtain any Visa/entry documents required for visiting Canada / USA.

ATTENDANCE

In order to get the maximum benefit from your study at ILSC, you are expected to attend class regularly and on time. You need to attend at least 80% of your classes each session, as part of the requirement to receive a credit for each course taken. You are required to speak with your counselor if you need permission for unavoidable or excessive absences.

CANADA YOUTH PROGRAM CANCELLATION AND REFUND POLICY

To receive a refund of any portion of tuition fees, you must give ILSC written notice that you intend to withdraw from the program in which you have enrolled. If your Study Permit or Visa is denied, ILSC will retain the lesser of 25% of the total tuition fees due or \$350.

If you cancel in writing before your program starts, you will receive a refund of the following percentage of your tuition fees:

- Less than 7 days after your registration is submitted, and at least 30 days before the program start date: the greater of either 75% of the total fees due or total fees minus \$350
- 30 days or more before the program start date: 75% of the total fees due
- Less than 30 days before the program start date: 60% of the total fees due

If you cancel in writing or are dismissed from ILSC after your program starts, you will be refunded the following percentage of your tuition fees:

- Less than 10% of program completed: 50% of total fees
- 10-30% of program completed: 30% of total fees
- More than 30% of program completed: 0% (no refund)

Specialty programs are not transferrable to core programs. If you change your program from a specialty program to a core program, you have to cancel the specialty program and re-apply for the core program.

If you are eligible for a refund under the conditions above, you will receive the refund within 30 days of ILSC receiving written notice of cancellation or ILSC's notice to you of dismissal.

USA YOUTH PROGRAM CANCELLATION AND REFUND POLICY

To receive a refund of any portion of tuition fees, you must give ILSC written notice that you intend to withdraw from the program in which you have enrolled. If your Study Permit or Visa is denied, or you cancel before your program start date, ILSC will retain the \$250 non-refundable Registration Fee. If you cancel in writing after your program starts or are dismissed from ILSC for just cause after your program starts, you will be refunded the following proportion of your tuition fees:

- If notice of cancellation is made through attendance at the first class session: ILSC shall refund 100% of the amount paid for tuition. Other fees are non-refundable once the program has started.
- If you have completed 60% or less of the period of attendance, ILSC shall refund 100% of unused tuition
- If you complete more than 60% of your program, ILSC shall NOT refund any portion of tuition

Refunds will be calculated on tuition only, according to the following package price breakdown:

Program Length	Package Price	Tuition Portion
1 week	\$1,495	\$450
2 week	\$2,425	\$650
3 week	\$3,445	\$850
4 week	\$4,335	\$1000
5 week	\$5,265	\$1188
6 week	\$6,195	\$1375
7 week	\$7,125	\$1563

Specialty programs are not transferrable to core programs. If you change your program from a specialty program to a core program, you have to cancel the specialty program and re-apply for the core program.

If you are eligible for a refund under the conditions above, you will receive the refund within 45 days of ILSC receiving written notice of cancellation or ILSC's notice to you of dismissal.

ENGLISH ONLY POLICY

In order to encourage the use of English/French, we have an English/French* Only Policy (*Montreal Only) in the school. This means that whenever you are in the school or participate in the class/school activities, you must speak English/French.

DISMISSAL POLICY

Students must keep good attendance and attend at least 80% of their classes. Students must speak only English/French when on school premises. If these expectations are not met, students will receive counseling. Then, after appropriate warnings, students will be expelled. Likewise, if a student's behavior is inappropriate by the school's standards, the above procedures will be followed.

DISPUTE RESOLUTION POLICY

ILSC encourages its students to talk freely about their lives and experiences in the school. Comments about the school's program help everyone to learn and become better. Students should share any difficulties or challenges they are facing. The teachers, student counselors and school administrators are available to listen to and guide students. If a student has a difficulty with the school itself, which cannot be corrected through discussion, then the student can present his/her concern in writing to the School Director, who will, in discussion and in writing, address and resolve the dispute.

BANKING/CONTACT INFORMATION

School contact info:	Transfer Canadian funds to:	Transfer U.S. funds to:
ILSC-Vancouver 555 Richards St. Vancouver, BC V6B 2Z5 Canada Tel 1 (604) 689-9095 Fax 1 (604) 683-0771 Email: info@ilsc.ca www.ilsc.ca	Bank of Montréal 595 Burrard St. Vancouver, BC V7X 1L7 Canada Account #: 08121251400 Swift Code: BOFMCAM2	Wachovia Bank Swift Code: PNBPU3NNYC For further credit to: The Bank of Montréal 595 Burrard St. Vancouver, BC V7X 1L7 Canada Bank Account: 00044680819 Swift Code: BOFMCAM2
ILSC-Toronto 443 University Ave Toronto, ON M5G 2H6 Canada Tel 1 (416) 323-1770 Fax 1 (416) 323-0153 Email: info@ilsc.ca www.ilsc.ca	TD Canada Trust 2 St. Clair Ave. East, Toronto, ON M4T 2V4 Canada Account #: 0617-0443-262 Transit #: 19682 Swift Code: TDOMCATTTOR	Bank of America NY, NY USA Swift Code: BOFAUS3N ABA: 0260-09593 For further credit to TD Canada Trust 2 St. Clair Ave. East, Toronto, ON M4T 2V4 Canada Account: 06177304166 Transit #: 19682
ILSC-Montréal 410 St-Nicolas Suite 300 Montréal, QC H2Y 2P5 Canada Tel 1 (514) 876-4572 Fax 1 (514) 876-4053 Email: info@ilsc.ca www.ilsc.ca www.learnfrench.ca	TD Canada Trust 999 de Maisonneuve West, Montréal, QC H3A 3L4 Canada Account #: 00500317202 Transit #: 45121 Swift Code: TDOMCATTTOR	Bank of America NY, NY USA Swift Code: BOFAUS3N ABA: 0260-09593 For further credit to TD Canada Trust 999 de Maisonneuve West, Montréal QC H3A 3L4 Canada Account: 00507307240 Transit#: 45121
ILSC-San Francisco One Embarcadero Center (at Battery St x Sacramento St) Lobby Level San Francisco, CA 94111-3607 USA Tel 1 (415) 677-9961 Fax 1 (415) 677-9591 Email: study@ilsc.com www.ilsc.com/san-francisco		Wells Fargo Bank, N.A. 420 MONTGOMERY ST. SAN FRANCISCO, CA 94104 Beneficiary Account Name: ILSC-San Francisco Account Number: 5053896931 Routing Transit Number: 121000248 Swift Code: WFBUS6S

*Program is defined as whatever length of time a student registers for.



PLEASE READ CAREFULLY

Please accept my application to participate in any or all activities provided by **ILSC (Vancouver) Inc.** or **ILSC (Toronto) Inc.** or **ILSC (Montréal) Inc.** or **ILSC (San Francisco) Inc.** (please circle the corporate name of the school which you are attending) hereinafter referred to as the ("School"), as described in the school brochures or as may be offered from time to time, by the School, its employees or representatives ("School Activities").

I N I T I A L S

For good and valuable consideration, the receipt and sufficiency of which is acknowledged, the undersigned student (or legal guardian) on behalf of the student if, the undersigned student (or legal guardian on behalf of the student if under age 19 in Canada or 18 in California) hereby agrees as follows:

I N I T I A L S

1. That many of the School Activities offered are sporting activities, require a certain degree of skill and physical fitness and that participating in such activities exposes me to certain risks of accident or injury.

I N I T I A L S

2. That by signing below I waive any and all claims that I have or may have in the future against the School its employees and representatives.

I N I T I A L S

3. I hereby release the School its employees and representatives from any and all liability for any injuries, loss, damage, or expense that I may suffer, or that my heirs, next of kin, executors, administrators, families or representatives may suffer as a result of my participation in School Activities due to any cause, including negligence and gross negligence, breach of contract, or breach of any statutory or other duty of care to the extent that the law permits such a release.

I N I T I A L S

4. I acknowledge and accept that during the course of my study at ILSC or during activity programs, I may be photographed, video taped or audio taped and I hereby grant ILSC unrestricted and non-expiring permission and all rights to use or license such media for any advertising or promotional purposes that ILSC may deem appropriate, without any compensation whatsoever.

I N I T I A L S

5. This Waiver shall be effective and binding upon my heirs, next of kin, executors, administrators, families or representatives in the event of my death or incapacity.

I N I T I A L S

6. The laws applicable in the Province of: British Columbia shall govern this Waiver if attending courses offered by ILSC (Vancouver) Inc.; Ontario shall govern this Waiver if attending courses offered by ILSC (Toronto) Inc.; Quebec shall govern this Waiver if attending courses offered by ILSC (Montréal) Inc.; and the laws applicable in the states of California shall govern this Waiver if attending courses offered by ILSC (San Francisco) Inc. I accept the exclusive jurisdiction of the courts of the Province in which I am attending School. If a portion of this Waiver shall be found to be wholly or partially invalid, this Waiver will be interpreted as if the invalid portion had not been a part of this Waiver.

I N I T I A L S

In entering into this Waiver, I am not relying upon any oral or written statements made by the School or its employees or representatives other than as written in this Waiver.

I N I T I A L S

I have read and fully understand this Waiver and I am aware that by signing this I am waiving certain legal rights which I or my family, next of kin, executors, administrators, and assigns may have against the School or its employees or representatives.

I N I T I A L S

Signed in _____ this _____ day of _____ in the year _____
C I T Y MONTH

Student Signature _____ Witness Signature _____

Student Name _____ Print Witness Name _____

ILSC Student Number: _____ (if known)

Signature of Parent or Legal Guardian: _____

Print Parent or Guardian Name: _____